10/689471

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

ALT: 00/56245(9)

Lifective October 1, 2000									401-	00	7200	ALC:
		CLAIMS A	S FILED -		(Column 2)			SMALL ENTITY TYPE		OR	OTHER	
TOTAL CLAIMS			3				· [RATE	FEE]	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA		8/	asic fee	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			3 minus 20=		· T			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		. 2			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PI			RESENT					+145=		OR	+290=	
* 11	the difference	in column 1 is	less than zero, enter "0" in			column 2		OTAL		OR	TOTAL	
	C	LAIMS AS A (Column 1)	MENDE	PAR' (Colum		(Column 3)	s	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 3	Minus	* 6	20	=	,	K\$ 9=		OR	. X\$18=	•
	Independent	. /	Minus	***	3	=	,	X43=		OR	X86=	
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		'	145=		OR	+290=	
								TOTAL OIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 5	Minus	* ~	20	=	 	(\$ 9=		OR	X\$18=	
	Independent	* /	Minus	**** C	2 CLAIM	= /)	(43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /							٠ ٠	145=		OR	+290=	
							ADD	TOTAL HT. FEE		OR ,	TOTAL ODIT. FEE	
· ,		(Column 1)		(Colum		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=	
	Independent	t	Minus	srink			×	43=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=			+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OR L	TOTAL DDIT. FEE	
	f the "Highest Nu	mber Previously Pa ber Previously Paid	Id For IN THIS	S SPACE is	less that	n 3, enter "3."	700		opriate box			